

GRAND JURY

COUNTY OF SAN DIEGO
330 West Broadway, Suite 477
San Diego, Ca 92101-3830
Phone (619) 515-8707
Fax (619) 515-8696

COMPLAINT FORM

(Please print clearly or type all information)

Date: _____

No. _____
(Office use only)

1. COMPLAINANT

Name _____

Address _____ City and Zip _____

Telephone (____) _____ Fax (____) _____

Best weekday time for a confidential conversation _____

2. SUBJECT OF COMPLAINT (AGENCY OR PERSON):

Name _____

Title _____ Department _____

Address _____

3. DESCRIPTION OF COMPLAINT

(Briefly state the action that is (was) improper, inefficient, dishonest, illegal, etc.)

4. SET FORTH THE FACTS UPON WHICH THE COMPLAINT IS BASED.

(Describe in detail: include all names, dates, places, etc. Attach copies of pertinent documents and correspondence: use and attach additional sheets as necessary.)

(OVER)

5. PLEASE DESCRIBE ALL COURT INVOLVEMENT IN ANY MATTER RELATED TO THIS COMPLAINT. (Attach copies of related documents if available.)

6. WHAT OTHER AGENCIES, OFFICIALS, OR PERSONS HAVE YOU CONTACTED IN AN ATTEMPT TO RESOLVE THIS COMPLAINT? (Give names, addresses, phone numbers, contact dates and other pertinent information.)

7. WHAT OTHER AGENCIES OR INDIVIDUALS DO YOU BELIEVE COULD ASSIST US IN OUR INVESTIGATION?
(Give names, addresses, phone numbers, etc.)

8. WHAT ACTION WOULD YOU LIKE TO SEE THE GRAND JURY TAKE IN THIS MATTER?

9. MAY THE GRAND JURY IDENTIFY YOU, IF NECESSARY IN PURSUING YOUR COMPLAINT?

Yes_____ No_____

SIGNATURE: _____

It is a crime to report to the Grand Jury that a crime has been committed knowing the report to be false.
Penal Code Section 148.5 (d)